LETTERS TO THE EDITOR

To the Editor:

The commentary by James E. Carter, MD, in the April-June issue of *JSLS* will be misleading to many readers [See Carter JE. Suture? Staple? Electrosurgery? How to decide what is best for you. *JSLS*. 1997;1:171-174]. The article suggests that it covers the best options for cutting and hemostasis during laparoscopic surgery, but Dr. Carter fails to discuss the use of ultrasonically activated instruments. The use of ultrasonic energy has become the preferred method for hemostatic dissection during laparoscopic surgery for a large number of surgeons.

The disadvantages of staples and clips, ligatures and electrocautery (both monopolar and bipolar) are discussed in the commentary, but none of the discussed methods eliminate most or all of the disadvantages. However, the ultrasonically activated shears are faster than clips or ligatures, and provide more secure hemostasis than clips of electrocautery. Additionally they are less costly than staplers, and safer than electrocautery.

Although the author makes a nice review of these other modalities, any surgeon performing advanced laparoscopic surgery should also have available the use of the ultrasonically activated instruments. In many, if not most, cases requiring advanced laparoscopic technique, the fastest, cheapest, and safest method will involve the use of the ultrasonically activated instrumentation. Clearly a commentary such as this should have included a discussion of this technology.

Sincerely,

Dennis L. Fowler, MD
Midwest Surgical Associates, P.A.
The Doctors Building
20375 W. 151St Street Suite 101
Olathe, Kansas 66061
Telephone: (913) 782-8577

Author's Response:

Dr. Fowler is to be complimented on his very interesting letter relating to the use of ultrasonic energy for hemostatic dissection during laparoscopic surgery. This instrumentation has been widely discussed and certainly has a role in the performance of myomectomies and in some cases of hysterectomies. The statement that "the ultrasonically activated shears are faster than clips or ligatures" to my knowledge has not been proven in an appropriate study. In fact, speed of surgery very likely depends as much on the skill of the surgeon using the particular tool as it does the tool itself. In addition, the statement that "the ultrasonically activated shears provide more secure hemostasis than clips or electrocautery" has also not been demonstrated in an appropriate study.

I certainly agree with Dr. Fowler that in the world in which I would like to live, I would have the modalities available that would include the ultrasonically activated instruments. I appreciate Dr. Fowler including this instrumentation in my discussion of the technology for options for cutting and hemostasis. As this energy source develops I am sure more and more surgeons and gynecologists will find it a useful addition to their armamentarium.

With warm regards,

James E. Carter, MD, PhD, FACOG
Medical Director, Women's Health Center of South Orange County, Inc.
Assistant Clinical Professor, University of California Irvine, College of Medicine, Department of Obstetrics & Gynecology.
Mission Hospital Regional Medical Center,
26732 Crown Parkway, Suite 541,
Mission Viejo, CA 92691, USA.
Telephone: (714) 364-5802,
Fax: (714) 364-2871,
E-mail: 76053.304@compuserve.com